EXPRESS MAIL NO. EV335547339US

PTO/SB/30 (04-05)

Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE ork Reduction Act of 1995, no persons are required to respon

REQUEST **FOR**

CONTINUED EXAMINATION (RCE) TRANSMITTAL

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Application Number	10/015,949
Filing Date	November 2, 2001
First Named Inventor	Stefano Gregori
Art Unit	2133
Examiner Name	Joseph D. Torres
Attorney Docket Number	854063.659

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1.	enclos	mission required under 37 CFR 1.114 Note: If the RCE is proper, any previously filed unentered amendments and amendments osed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).				
	a. Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.					
	i. ii.	Consider the arguments in the Appeal Brief or Repl Other	y Brief pro	eviously filed on		
	b. 🗶	Enclosed				
	i.	Amendment/Reply	iii.	Information Disclosure Statement (IDS)		
	ii	Affidavit(s)/Declaration(s)	iv.	X Other Fee Transmittal (+copy): Postcard		
2.	Misce	llaneous				
	a. []	Suspension of action on the above-identified application a period of months. (Period of suspension shall not	on is requ ot exceed :	uested under 37 CFR 1.103(c) for 3 months; Fee under 37 CFR 1.17(i) required)		
	b. 🗌	Other				
3.	Fees	The RCE fee under 37 CFR 1.17(e) is required by 37 CFR	1.114 whe	en the RCE is filed.		
	a. 🗌	The Director is hereby authorized to charge the follow overpayments, to Deposit Account No. <u>19-1090</u> . I have				
	i.	RCE fee required under 37 CFR 1.17(e)				
	ii.	Extension of time fee (37 CFR 1.136 and 1.17)				
	iii.	Other				
	b. 🛛	Check in the amount of \$ 1440 enclosed				
	c. 📗	Payment by credit card (Form PTO-2038 enclosed)				
		WARNING: Information on this form may become provide credit card information and authorization o		edit card information should not be included on this form. 18.		
	SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
Signature		Date	September 26, 2005		
Name (Print /Type)	Robert lannucci	Registration No.	33,514		
,,,,	<u></u>			-,-	

CERTIFICATE OF	MAILING (OR TRAN	SMISSION
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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner For Patents, P.O. Box 1450 Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Signature

Name (Print /Type)

Date

This collection of information is required by 37 CFR 1.114. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop C:\NrPortbl\iManage\LAURAT\694479_1.DOC RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004. Complete if Kno					wn				
FFF TRANSMIT/5AI				Application Number 10/015,949					
	IRANS	SMIT/DA	/L ~ 3/	Filing Date	<u> </u>	November 2	·		
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- 20h		1 5	3 4	Examiner Na	ame	Joseph D. T	orres		
Applicant claims s				Art Unit		2133			
TOTAL AMOUNT OF			WE TRADENT	Attorney Do	cket No.	854063.659			
METHOD OF PAYM	ENT (check a	II that apply)							
Check Cred	lit Card	Money Order	r 📗 Other	(please identify	y):				
Deposit Account									
For the above-id	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee	(s) indicated I	pelow		Charge fee(:	•			_	
		e(s) or underp	ayments	X Charge any	underpayn	nents or credit	any overpay	yments	
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FEE CALCULATION	<u> </u>								
1. BASIC FILING, S	EARCH, ANI	EXAMINATI	ON FEES						
	FILING	FEES	SEARC	H FEES		INATION EES			
		Small Entity	Y.	Small Entity	<u>!</u>	Small Entity			
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees P	aid (\$)	
Utility	300	150	500	250	200	100			
Design	200	100	100	50	130	65			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM				_	_	_	Sm	nall Entity	
Fee Description						<u> </u>		Fee (\$)	
Each claim over 20 (in	cluding Reiss	ues)					50	25	
Each independent clai	_	•)				200	100	
Multiple dependent cla	-	g	•				360	180	
Total Claims	Extra Cla	aime F	ee (\$)	Fee Paid	(\$)	Multiple	Dependent		
30 -21 or HP		X .	<u>50</u> =	450 Fee (\$)			Fee Paid (\$)		
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3. APPLICATION S					laaniaalla El			l: -4:	
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)) the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets	Extra She	•		dditional 50 o	r fraction	thereof Fe	e (\$)	Paid (\$)	
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100 = /50 = (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): Request For Continued Examination Fee 790									
							•		
SUBMITTED BY			 						
Signature	1/2/			istration No. orney/Agent)	33,514	Telephone	206-622-49	900	
Name (Print/Type)			1 /7111	"" GALAGOIL		Date	September		